anu2773/2

In re Application of

LAURENCE LAVENDEL, et al.

Application No.: 08/944,435

Filed: October 6, 1997

For: USER INTERFACE FOR IMAGE

ACQUISITION DEVICES

Docket No. 36J.P143

Examiner: S. Luu

Group Art Unit: 2773

Date: March 13, 2900

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THE ASSISTANT COMMISSIONER FOR PATENTS Washington, D.C. 20231

000S 0 S 8AM

Sir:

Transmitted herewith is an amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

			CLAIMS AS AM	ENDED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 35	MINUS	** 108	- 0 -	x \$9 \$18	- 0 -
INDEP. CLAIMS	* 5	MINUS	*** 16	= - 0 -	x \$39 \$78	- 0 -
Fee for Multiple Dependent claims \$130°/\$260						None
			TOTAL ADDIT			- 0 -

^{*} If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

thereby cartify that this correspondence is being deposited with the United States Postal Service as first states small in an envelope addressed to: Australia Commissions for Pointin, Whitington, D.O. 2023 on 3/13/00

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Correla A. Cultur, Rec., No., 59,000

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^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	°Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Assistant Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
X	A check in the amount of $$870.00$ to cover the fee for a <u>three</u> month extension is enclosed.
X	A check in the amount of $$240.00$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicants' undersigned attorney may be reached in our Costa Mesa, CA office by telephone at (714) 540-8700. All correspondence should continue to be directed to our below-listed address.
	Attorney for Applicants
	Reg. No. 39,000

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

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